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| DISTRIBUTION | | ·=://00.011.0 | COLUCED ATTION COMMISSIO | W |
| SANTA FE | NEW M | | CONSERVATION COMMISSIC FOR ALLOWABLE | N Form C-104 Supersedes Old C-104 and C-11 |
| FILE | | REQUEST | AND | Effective 1-1-65 |
| U.S.G.S. | AUTUODIZAT | TO TO | | LIDAL CAS |
| | AUTHURIZAT | ION TO TRA | ANSPORT OIL AND NAT | |
| LAND OFFICE IRANSPORTER GAS / | | | OF BOTH LaMA INC. THIS PURC | RATION PURCHASED ALL THE ASSETS R TRUCKING, INC. AND INLAND CRUDE, HASE INCLUDED N. M. S. C |
| OPERATOR | | | PERMIT # 670 \ | WHICH HAS JEEN TRANSFERRED TO |
| PRORATION OFFICE | | | INLAND CORPC | PRATION. |
| Operator | _ | | , | CLYDE C. LaMAR, PRESIDENT |
| Pieneer Production | Corp. | | | INLAND CORPORATION |
| Box 234, Farmington | . N. M. | | | |
| Reason(s) for filing (Check proper | | | Other (Please expl | ain) |
| New Well | Change in Transpo | orter of: | | |
| | Oil | Dry Go | ys. | |
| Recompletion | Casinghead Gas | Conde | Tefastina | 4/1/65 |
| Change in Ownership | Castingheda ads [| | insute | |
| If change of ownership give nat and address of previous owner | | · | | |
| Lease Name | ND LEASE We | ell No. Pool No | me, Including Formation | Kind of Lease |
| Redfern | | | | State, Federal or Fee Federal |
| | | A Da | sin Dakata | * 0401 0.2 |
| Location | 9 Pda | | | Wa sak |
| Unit Letter; | 1580 Feet From The | South Lin | ne and 1010 Fe | eet From The |
| | | | | |
| Line of Section 16 | , Township 28N | Range | , NMPM, | San Juan County |
| | | | | |
| I. DESIGNATION OF TRANSF | ORTER OF OIL AND N | ATURAL GA | AS | |
| Name of Authorized Transporter of | f Oil or Condensate | | Address (Give address to wh | ich approved copy of this form is to be sent) |
| It laker Trucking, | True. | | | |
| Name of Authorized Transporter of | | | Box 1528. Fart | mington. N. M. |
| | f Casinghead Gas cr D | Ory Gas 🔀 | Box 1528 Farm Address (Give address to wh | nington, N. M. ich approved copy of this form is to be sent) |
| El Paso Natural Gas | f Casinghead Gas cr D | Ory Gas 🔀 | | |
| El Paso Natural Gas | f Casinghead Gas cr D | | Box 1528 Far. Address (Give address to whe Box 990 Far. Is gas actually connected? | |
| If well produces oil or liquids, | f Casinghead Gas or D | vp. Rge. | Box 990, Farm | |
| If well produces oil or liquids, give location of tanks. | f Casinghead Gas Cr D Co. Unit Sec. Tw 16 2 | vp. Rge. | Box 990, Farm Is gas actually connected? | Ington N. M. |
| If well produces oil or liquids, give location of tanks. If this production is commingle | f Casinghead Gas Cr D Co. Unit Sec. Tw 16 2 | vp. Rge. | Box 990, Farm Is gas actually connected? | Ington N. M. |
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| If well produces oil or liquids, give location of tanks. If this production is commingle of COMPLETION DATA Designate Type of Comp Date Spudded Pool Perforations HOLE SIZE V. TEST DATA AND REQUES OIL WELL Date First New Oil Run To Tank | f Casinghead Gas cr D Go. Unit Sec. Tw I 16 2 d with that from any other letion - (X) Date Compl. Ready to Name of Producing For TUBING, CASING & TUB T FOR ALLOWABLE Date of Test | Prod. CASING, ANBING SIZE | Box 950 Farm Is gas actually connected? Yes give commingling order num New Well Workover D Total Depth Total Depth Top Cil/Gas Pay DEPTH SET after recovery of total volume of epth or be for full 24 hours) Producing Method (Flow, pu | when when some Res'v. Diff. Res'v. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT f load oil and must be equal to or exceed top allow mp, gas lift, etc.) |
| If well produces oil or liquids, give location of tanks. If this production is commingle of COMPLETION DATA Designate Type of Comp Date Spudded Pool Perforations HOLE SIZE V. TEST DATA AND REQUES OIL WELL Date First New Oil Run To Tank Length of Test | f Casinghead Gas cr D Go. Unit Sec. Tw 1 16 2 d with that from any other letion - (X) Date Compl. Ready to Name of Producing For TUBING CASING & TUB T FOR ALLOWABLE Date of Test Tubing Pressure | Prod. CASING, ANBING SIZE | Box 990 Farm Is gas actually connected? Yes give commingling order num New Well Workover D Total Depth Top Cil/Gas Pay DEPTH SET after recovery of total volume of epth or be for full 24 hours) Producing Method (Flow, purification) Casing Pressure | when when Plug Back Same Res'v. Diff. Res'v. P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT f load oil and must be equal to or exceed top alloump, gas lift, etc.) Choke Size |

VI. CERTIFICATE OF COMPLIANCE

Testing Method (pitot, back pr.)

Actual Prod. Test-MCF/D

GAS WELL

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Length of Test

Tubing Pressure

| Original | signed by T. A. Dugan | |
|------------|-----------------------|--|
| | (Signature) | |
| Consulting | Engineer | |
| | (Title) | |
| 3/8/65 | | |
| #L 71 75 | (Date) | |

OIL CONSERVATION COMMISSION

OIL COM

| APPROVED MAR 15 | , 1965 , 19 |
|-----------------|----------------------|
| BY diste | Sugarele |
| TITLE PETROLEUM | ENGINEER DIST. NO. 3 |

Bbls. Condensate/MMCF

Casing Pressure

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.